REMARKS

No claims have been canceled, amended or added in this paper. Therefore, claims 1-14, 16-22 and 39-41 are pending. Of these claims, claims 4, 7-8, 11-12 and 19 have been "withdrawn from further consideration pursuant to 37 CFR 1.142(b) as being drawn to a...nonelected Species." Accordingly, claims 1-3, 5-6, 9-10, 13-14, 16-18, 20-22 and 39-41 are under active consideration.

Claims 1-3, 5-6, 9-10 and 20 stand rejected under 35 U.S.C. 102(b) "as being anticipated by Viek (USPN 3,908,663)." In support of the rejection, the Patent Office states the following:

Viek has a medical catheter, an inner sleeve, a fitting, an external bolster or base, a sleeve and wherein the inner sleeve has an open proximal end, an open distal end and a longitudinal bore extending from said open proximal end to said open distal end wherein the fitting has an open proximal end and an open distal end, said open distal end of said fitting being coupled to said proximal end of said inner sleeve in such a way as to permit materials to pass between said fitting and said inner sleeve (See Figure 1 and 3 and entire reference).

Applicants respectfully traverse the subject rejection. Claim 1 recites "[a] medical catheter assembly comprising:

- (a) a medical catheter, said medical catheter having a proximal end, a distal end and a longitudinal bore, said distal end being shaped to define an internal bolster;
- (b) an inner sleeve, said inner sleeve having a proximal end and a distal end, at least a portion of said inner sleeve being removably disposed within said longitudinal bore of said medical catheter; and
- (c) a body, said body having a base and a sleeve, said base having a transverse bore, said sleeve extending upwardly from said base and having a longitudinal bore, said longitudinal bore of said sleeve being aligned with said transverse bore of said base, said proximal end of said medical

catheter being inserted up through said transverse bore of said base and said longitudinal bore of said sleeve and then inverted over the top of said sleeve."

Claim 1 is neither anticipated by nor rendered obvious over <u>Viek</u> for a number of reasons. First, whereas claim 1 requires that the medical catheter have a distal end shaped to define an internal bolster, <u>Viek</u> does not teach or suggest a medical catheter having a distal end shaped to define an internal bolster. Instead, the medical catheters of <u>Viek</u>, namely, catheter tube 4 in Fig. 1 and tubular sleeve 19 in Fig. 3 are straight, cylindrical members whose distal ends do not define internal bolsters.

Second, whereas claim 1 requires that the proximal end of the medical catheter be inserted up through the base and the sleeve of a body and then be inverted over the top of the sleeve, <u>Viek</u> does not teach or suggest any inverting of the medical catheter (i.e., catheter tube 4 or tubular sleeve 19 of <u>Viek</u>), let alone inverting the proximal end of the medical catheter over the top of the sleeve. Instead, the only structures in <u>Viek</u> that could arguably be said to be inverted are envelope 6/bands 7 in Fig. 1 and envelope 20 in Fig. 3. Putting aside for the moment the fact that envelope 6/bands 7 and envelope 20 are not even medical catheters (<u>see</u>, for example, bands 7 in Fig. 2 of <u>Viek</u>), the proximal ends of these structures are not inverted over the top of the sleeve of a body, but rather, are inverted over forward portion 5 of catheter tube 4 and over tubular sleeve 19, respectively. Furthermore, even if one were to regard envelope 6/bands 7 and envelope 20 as the claimed medical catheter having an inverted proximal end (a position that Applicants contend would be improper for at least the reasons above), there is no structure in <u>Viek</u> corresponding to the claimed inner sleeve, at least a portion of which is removably disposed within the medical catheter. More specifically.

as seen in Fig. 1 of <u>Viek</u>, nothing is disposed within envelope 6. Moreover, catheter tube 21 of Fig. 3 of <u>Viek</u> is **inseparably** secured to envelope 20 (<u>see</u> col. 2, line 68 through col. 3, line 3, of <u>Viek</u>).

Therefore, for at least the above reasons, claim 1 is patentable over <u>Viek</u>.

Claims 2-3, 5, 6, 9, 10 and 20 depend from claim 1 and are patentable over <u>Viek</u> based at least on their respective dependencies. In addition, claim 2 is further patentable over <u>Viek</u> because there is no teaching or suggestion in <u>Viek</u> of the claimed external barb. In fact, it would seem that such an external barb would be undesirable in <u>Viek</u> since this would hinder the covering/uncovering of the envelope. Moreover, claims 9 and 10 are further patentable over <u>Viek</u> because there is no teaching or suggestion of a fitting. Furthermore, claim 20 is further patentable over <u>Viek</u> since there is no teaching or suggestion in <u>Viek</u> of using a gastrostomy feeding tube as the medical catheter.

Accordingly, for at least the above reasons, the subject rejection should be withdrawn.

Claims 1-3, 5-6, 9-10, 13-14, 16-18, 21-22 and 39-41 stand rejected "under the judicially created doctrine of obviousness-type double patenting as being unpatentable over claims 1-31 of U.S. Patent No. Chu et al. (USPN 6,666,853) and specifically claim 3, which recites the medical tube is inverted." In support of the rejection, the Patent Office states that "[a]lthough the conflicting claims are not identical, they are not patentably distinct from each other because they both contain the medical catheter, the inner sleeve, the cap, the clamp, the body, the fitting, the plug and the sleeve."

Without acquiescing in the propriety of the rejection, Applicants are submitting herewith a Terminal Disclaimer to obviate the rejection.

Accordingly, for at least the above reasons, the subject rejection should be withdrawn.

Claims 13, 14, 16-18, 39 and 40 stand objected to "as being dependent upon a rejected base claim, but would be allowable if rewritten in independent form including all of the limitations of the base claim and any intervening claims."

Applicants respectfully traverse the subject objection. The subject objection is predicated upon the presence of a rejected base claim; however, for at least the reasons given above, the base claim should not be rejected. Accordingly, the subject objection should be withdrawn.

Claims 21, 22 and 41 are said to be "in condition for allowance, but need a terminal disclaimer." As noted above, a Terminal Disclaimer is submitted herewith. Therefore, claims 21, 22 and 41 are in condition for allowance.

In conclusion, it is respectfully submitted that the present application is in condition for allowance. Prompt and favorable action is earnestly solicited.

If there are any fees due in connection with the filing of this paper that are not accounted for, the Examiner is authorized to charge the fees to our Deposit Account No. 11-1755. If a fee is

required for an extension of time under 37 C.F.R. 1.136 that is not accounted for already, such an extension of time is requested and the fee should also be charged to our Deposit Account.

Respectfully submitted,

Kriegsman & Kriegsman

By: Lew 00 0000 Edward M. Kriegsman

Reg. No. 33(529

665 Franklin Street

Framingham, MA 01702

(508) 879-3500

Dated: August 22, 2005

Edward M. Kriegsman

Reg. No. 33,529

Dated: awint 22, 2005